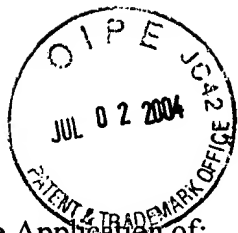


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BOX AF

Response Under 37 C.F.R. § 1.116
Group Art Unit 2654, Expedited Procedure
Docket No. 03500.014127.

In re Application of:

MASANORI WAKAI ET AL.

Appln. No.: 09/471,030

Examiner: P. N. Edouard

Filed: December 23, 1999

Group Art Unit: 2654

For: INFORMATION PROCESSING APPARATUS
AND METHOD CAPABLE OF PROCESSING
DIFFERENT TYPES OF INFORMATION FROM
A PLURALITY OF INPUT UNITS (As Amended)

Date: June 29, 2004

Mail Stop AF
Commissioner for Patents
P. O. Box 1450
Alexandria, VA 22313-1450

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JUL 07 2004

Technology Center 2600

Sir:

Transmitted herewith is an amendment after final rejection above-identified application.

☒ No additional fee is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	* 39	MINUS	** 45	= 0	x \$9 \$18	\$0
INDEP. CLAIMS	* 3	MINUS	*** 3	= 0	x \$43 \$86	\$0
Fee for Multiple Dependent claims \$145°/\$290						\$0
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						\$0

- * If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.
- ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
- *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

- ☐ °Verified Statement claiming small entity status is enclosed, if not filed previously.
- ☐ A check in the amount of \$____ is enclosed.
- ☐ Charge \$____ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.
- ☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Patent and Trademark Office is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205.
- ☐ A check in the amount of \$_____ to cover the Extension fee for response with a ____-month extension is enclosed.
- ☐ A check in the amount of \$____ to cover the Information Disclosure Statement fee is enclosed.
- ☒ Applicants' undersigned attorney may be reached in our New York Office by telephone at (212) 218-2100 or by facsimile at (212) 218-2200. All correspondence should continue to be directed to our address given below.

Respectfully submitted,



Leonard P. Diana
Attorney for Applicants

Registration No. 29,296

FITZPATRICK, CELLA, HARPER & SCINTO
30 Rockefeller Plaza
New York, New York 10132-3801
Facsimile: (212) 218-2200
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Assistant Commissioner for Patents
Washington, D.C. 20231

Date 5 31 100
Mo. Day Yr.

Atty. Docket 35C14127

09/471.030

Sir:

Kindly acknowledge receipt of the accompanying:

- ☐ Specifications, claims and abstract _____ pages, with Transmittal Form
☒ Oath or Declaration and Power of Attorney ☒ Executed ☐ Not Executed
☐ _____ Sheets of _____ formal _____ informal drawings
☒ Check for \$ 130.00 (filing fee)
☐ Small entity declaration

☐ Assignment, PTO-1595 and Check for \$ _____

☐ Transmittal Under 37 CFR 1.53(d) (CPA)

☐ Petition under 37 CFR 1.136 and check for \$ _____

☒ Other (specify) Claim to Priority

by placing your receiving date stamp hereon and certified priority document returning to deliverer.

This is a ☐ Continuation ☐ Divisional ☐ Continuation-In-Part

Atty. J. M. W.

Due Date 4 18 00
Mo. Day Yr.

37 CFR 1.8 ☐

37 CFR 1.10 ☐

By Hand ☒

FOHS-A-95

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